



Addressing Healthy Sexual Development with Special Populations

- Commercially Sexually Exploited Children and Youth
- LGBTQ Youth
- Transgender (TG) and Gender Non-Conforming (GNC) Youth

Considering special populations when addressing sexual health and wellness with young people:

- Let's consider the following:
 - Sexually Exploited Youth
 - LGBTQ Youth
 - Transgender (TG) and Gender Non Conforming (GNC) Youth

Commercially Sexually Exploited Children (CSEC)

In recent years, many foster youth have fallen prey to sex traffickers. County child welfare programs across the state have developed local services addressing this important issue. These youth are referred to as "CSEC".

Sex Trafficking: a modern form of slavery. Sex traffickers use violence, threats, lies, debt bondage and other forms of coercion to compel individuals to engage in commercial sex acts against their will.

Under U.S. federal law, any minor under the age of 18 years induced into commercial sex is a victim of sex trafficking – regardless of whether or not the trafficker used force, fraud or coercion.

Studies report that up to 90% of child sex trafficking victims have been involved in the child welfare system

California CSEC Statistics:

- Between 2015 and 2018, **4,713 youth in foster care were CSEC victims or considered to be “at risk”**
- This figure is only an estimate and the actual number of CSEC victims in foster care may be much higher. The child welfare system database is only able to count the youth who are reportedly victims and many victims go unreported.

Sex Trafficking **Red Flags**:

- Chronic truant / runaway / homeless youth
- Excess cash Hotel room keys
- Multiple cell phones
- Signs of branding (tattoos, jewelry)
- Having expensive items with no known source of income (especially hair, manicures, cell phone, clothes)
- Lying about age / false identification/inconsistencies in information being reported
- Dramatic personality change; evasive behavior especially around a “new boyfriend”
- Talk about being “taken care of”
- Disengagement from school, sports, community
- Lack of knowledge of a given community or whereabouts
- Provocative clothing, sex toys, multiple condoms, lube or other sexual devices

The Harm Reduction Approach:

- Realizing a youth is being trafficked can be a horrific thing for a caregiver, but simply telling the youth to stop, grounding them, or punishing them is not an effective way to get them out of a trafficking situation.
- The goal of the harm reduction model is to reduce negative consequences of exploitation and increase safety through small steps in the right direction
- For example, harm reduction could mean a young person reducing the number of days or nights they engage in commercial sexual activity, using safer sex supplies, knowing who to call for help, and connecting with service providers.

Always communicate with the social worker when you feel your youth or non-minor dependent may be a victim

Questions you can ask a youth if you suspect they are being trafficked:

1. What kind of support do you need?
2. Sometimes people trade sex for money or because they have to survive, has that happened to you?
3. I'm concerned about your safety, are there places that are dangerous for you to go?
4. Are there people that are dangerous for you to be around right now?
5. I'm concerned you are in the life. I will not judge you or anything you tell me.

Get support.

CSEC youth face many complicated issues and they often feel immense pressure to continue in “the life”. If you believe your youth has been or is currently being trafficked, talk to the youth and also talk to the youth’s worker.

You need support.

What is SOGIE?

SOGIE: Sexual Orientation Gender Identity & Expression:

Everyone has a SOGIE!

- SO is for Sexual Orientation
- GI is for Gender Identity
- GE is for Gender Expression

Research has shown that LGBTQ youth are over-represented in the foster care system

This means that the percentage of youth in foster care who are LGBTQ-identified is larger than the percentage of LGBTQ youth in the general youth population.

LGBTQ youth in foster care

- **78 percent** of LGBTQ youth were removed or ran away from their foster placements as a result of hostility toward their sexual orientation or gender identity
- **100 percent** of LGBTQ youth in group homes reported verbal harassment
- **70 percent** of LGBTQ youth reported physical violence in group homes

Transgender and Gender Non-Conforming (TGNC) Youth in Foster Care

- **TGNC** – Transgender Non Conforming
- Transgender: An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth.
- Gender nonconforming: A term that some people use to describe themselves when they do not dress, behave, or otherwise “fit in” with gender expectations.

Transgender and Gender Non-Conforming (TGNC) Youth in Foster Care continued...

- According to a recent federally-funded study of Los Angeles County's foster care system, approximately **5.6% of youth** in foster care identify as transgender.
- **TGNC youth and young adults** in foster care experience unique challenges caused by personal biases and religious beliefs from their families, caregivers, peers, and professionals who, because of a lack of understanding, often reject and demean their core identities.

Supporting **LBGTQ** and **TGNC** Youth Romantic Relationships

- Be inclusive: substitute “do you have a boyfriend” with “are you dating anyone?”
- Understand and advocate for your LBGTQ and TGNC youth’s medical and psychological needs
- Help create a community of support
- Put any biases aside and be an ally for your youth!

Gender Affirming Care is Vital

It is critical that caregivers and all others working with foster youth are responsive to the unique needs of TGNC youth and young adults.

TGNC children and youth in foster care often experience periods of homelessness, high rates of depression, suicidality, and substance abuse.

Do not ignore or discredit a youth's request or need for gender affirming health and mental health care.

Conclusion:

- A caregiver is not expected to be an expert on working with youth who are victims of CSEC or with youth who identify as LGBTQ or TGNC!
- However, a caregiver is expected to put their own biases and beliefs aside for the safety and best interests of their youth
- Remember: The social worker is there to help provide guidance and answer questions! Reach out to them or other professionals